

87 Nepperhan Ave
Room 212
Yonkers, NY 10701

CITY OF YONKERS
COIN-OPERATED
AMUSEMENT DEVICE
LICENSE APPLICATION

Phone: 914-377-6808
Fax: 914-377-6811
Website:
www.YonkersNY.gov

INSTRUCTIONS FOR USING THIS FORM

Please Note:

If the required supporting documents are not submitted with the application, it will result in the delay and/or denial of the application.

Requirements:

1. Application must be signed by the applicant before a Notary Public.
2. Provide a copy of a valid NYS Driver's License issued by the Motor Vehicle Department. If you do not have a NYS Driver's License, a copy of a Motor Vehicle issued NY State ID Card is required.
3. Application must be completely filled out by the owner of the owner/proprietor of the business wherein the device(s) will be placed.
4. The Department of Housing and Buildings must inspect the premises prior to licensing. Please submit a separate payment in the amount of \$25, payable to the Department of Housing and Buildings, with the enclosed application.
5. The Department of Housing and Buildings will also make a determination as to the number of amusement devices that will be allowed on the premises, based on applicable zoning law.
6. The license fee is \$100 per device. When your application has been approved by the Department of Housing and Buildings, we will notify you as to the number of devices for which the license will be issued and the appropriate fee.

LICENSING FEES AND EXPIRATION DATE

\$100.00/device License expires March 31st following date of issuance.

NAME OF OWNER/PARTNERS/MEMBERS OF CORPORATION

NAME (if Corporate Officer, please note title)	RESIDENTIAL ADDRESS	PHONE #

Philip A. Amicone, Mayor
Office of Municipal Code Violations Frank J. McGovern, Executive Director
Consumer Protection Bureau Kerry O'Brien, Director

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Video Game

Pursuant to the provisions of the Code of the City of Yonkers, I the undersigned respectfully petition for the below-listed license in the City of Yonkers, and for that purpose, I hereby provide the following answers to the questions contained herein.

APPLICATION MUST BE FILLED OUT BY OWNER/LESSEE OF PREMISES

Name:	Social Security #:			
Address:				
City:	State:		Zip:	
Home Phone #:	Cell #:	E-mail:		
Date of Birth:	Sex:	Height:	Hair Color:	Eye Color:
Are you a citizen of the United States?				
If not, please provide a copy of your INS A Card and #				
Have you ever been arrested or convicted of a crime?				
If yes, explain:				
Name of Company:				
DBA/Trade or Display Name (If same name, enter N/A):				
Address:	State:		Zip:	
Telephone:	E-mail:			
If incorporated, name of corporation:				
State in which corporation organized:			Date of Corporation:	

License #: _____	Date Issued: _____
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APPLICATION MUST BE FILLED OUT BY OWNER/LESSEE OF PREMISES

Name of business at which devices are to be placed:

Address:

Type of Business:

Is premises owned or leased by applicant?

If leased, complete section below.

Name of Property Owner:

Telephone #:

Address:

Number of devices for which application is made:

Are the devices for which application is made owned by the applicant or vendor?

If owned by a vendor, complete the section below.

Name of Vendor:

Telephone #:

Address:

List below the name(s) and serial number(s) of devices:

<u>Name of Device</u>	<u>Serial Number</u>

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I, _____, being duly sworn, deposes and says that all of the answers in the foregoing application are true.

Signature/Date: _____ Print name: _____

Notary Public

Hold Harmless Clause

This "Hold Harmless Clause" must be signed by an officer of your organization, dated and witnessed.

The Vendor agrees to protect, defend, indemnify and hold the City of Yonkers, et al and its employees free and harmless from and against any and all losses, claims, liens, demands, and causes of action of every kind and character including, but not limited to the amount of judgments, penalties, interest, court cost, legal fees incurred by the City of Yonkers, et al arising in favor of any party, included in claims, liens, debts, personal injuries, including employees, of the City of Yonkers, et al, death or damages to property (including property of the City of Yonkers, et al) and without limitations by enumeration, all other claims or demands of every character occurring or in anyway incident to, in connection with or arising directly or indirectly out of the said agreement.

Witness

Signature

Dated

Dated

Philip A. Amicone, Mayor
Office of Municipal Code Violations Frank J. McGovern, Executive Director
Consumer Protection Bureau Kerry O'Brien, Director